

APPLICATION DATA SHEET

Application Information

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?::

Computer Readable Form (CRF)?:: No

Number of Copies of CRF::

Title:: ELECTRIC FOOD SLICER

Attorney Docket Number:: 016660-167

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure:: 8

Total Drawing Sheets:: 13

Small Entity?:: No

Latin Name::

Variety Denomination Name::

Petition Included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Hong Kong
Status::	Full Capacity
Given Name::	Wing Chung Joseph
Middle Name::	
Family Name::	LAU
Name Suffix::	
City of Residence::	Pokfulam
State or Province of Residence::	
Country of Residence::	Hong Kong
Street of Mailing Address::	Rm 4325, Block 43, 25/F, Baguio Villa, 550 Victoria Road
City of Mailing Address::	Pokfulam
State or Province of Mailing Address::	
Country of Mailing Address::	Hong Kong
Postal or Zip Code of Mailing Address::	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Hong Kong
Status::	Full Capacity
Given Name::	Leung Chi
Middle Name::	
Family Name::	HO
Name Suffix::	
City of Residence::	New Territories
State or Province of Residence::	
Country of Residence::	Hong Kong
Street of Mailing Address::	Rm 901, Block N, Allway Gardens, Tsuen Wan

City of Mailing Address:: New Territories

State or Province of Mailing Address::

Country of Mailing Address:: Hong Kong

Postal or Zip Code of Mailing
Address::

Correspondence Information

Correspondence Customer Number:: 21839

Phone Number:: (703) 836-6620

Fax Number: (703) 836-2021

Representative Information

Representative Customer Number:: 21839

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee Name::	Eastern Sources Housewares (Hong Kong) Limited
Street of Mailing Address::	Unit C, 14/F, Block A, Chung Mei Centre, 15-17 Hing Yip Street, Kwun Tong
City of Mailing Address::	Kowloon
State or Province of Mailing Address::	
Country of Mailing Address::	Hong Kong
Postal or Zip Code of Mailing Address::	